

<b>CLAIMS ONLY</b>	SERIAL NO. <div style="border: 1px solid black; padding: 2px; display: inline-block;">10009625</div>	FILING DATE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
APPLICANT(S) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
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TOTAL IND.	1					
TOTAL DEP.	3					
TOTAL CLAIMS	4					

  

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS